Applicant's Name (Last-First-Middle Initial)			Enter first 03 5 letters of last name		2. Social Security Number			04	
			lasi name						
3. Date of Birth (Year & Month) (Example - born January 14, 1943 shown as 43/01 4. Home Address (Number, street, city, State, ZIP code)									
5. Home Telephone 6. Position level (Mark				only) 8. Office telephone					
Area code Number	a. Non-Supervisory c. Manager					Area code	Number	mber Extension	
b. Supervisory d. Executive								, 	
7. Organization mailing address (Branch-Division/Office/Bure)		9. Continuous Civilian service			
					Years	Months	non-government training days		
							! ! !	uanina aavo	
11a. Position title/function	11b. Applicant handi- capped or disabled (See instructions)			12.	Pay plan/series/grade/step				
13. Type of appointment 14. Education		SAVE Record UPDA			TE Record DELETE Record			ord	
Return to Summary Screen		CLEAR	Form Find Employee Info						elp